

Electronic Articles of Incorporation For

**P25000001142
FILED
April 22, 2024
Sec. Of State
adjohnson**

MEMORY CARE SOLUTIONS, INC.

The undersigned incorporator, for the purpose of forming a Florida profit corporation, hereby adopts the following Articles of Incorporation:

Article I

The name of the corporation is:

MEMORY CARE SOLUTIONS, INC.

Article II

The principal place of business address:

9881 BRIGHT WATER DRIVE
ENGLEWOOD, FL. UN 34223

The mailing address of the corporation is:

9881 BRIGHT WATER DR
ENGLEWOOD, FL. UN 34223

Article III

The purpose for which this corporation is organized is:

ANY AND ALL LAWFUL BUSINESS.

Article IV

The number of shares the corporation is authorized to issue is:

100

Article V

The name and Florida street address of the registered agent is:

LISA G FINK
9881 BRIGHT WATER DR
ENGLEWOOD, FL. 34223

I certify that I am familiar with and accept the responsibilities of registered agent.

Registered Agent Signature: LISA G FINK

Article VI

The name and address of the incorporator is:

LISA G FINK
9881 BRIGHT WATER DR

ENGLEWOOD, FL 34223

Electronic Signature of Incorporator: LISA G FINK

I am the incorporator submitting these Articles of Incorporation and affirm that the facts stated herein are true. I am aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of this corporation and every year thereafter to maintain "active" status.

Article VII

The initial officer(s) and/or director(s) of the corporation is/are:

Title: PRES
LISA G FINK
9881 BRIGHT WATER DR
ENGLEWOOD, FL. 34223 UN

Title: VP
JENNIFER C FINK
9881 BRIGHT WATER DR
ENGLEWOOD, FL. 34223 UN

Article VIII

The effective date for this corporation shall be:

04/22/2024

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Please accept this communication as owner, Lisa G. Fink to declare that I am the previous owner of **Memory Care Solutions, LLC**. Please accept my authorization and request to release the LLC so that we may become incorporated under Chapter S, as **Memory Care Solutions, Inc.** This follows your internal reference tracking number: **000 424 059 360**

Thank you,
Lisa G. Fink, owner/founder
(Contact information highlighted below)

LISA FINK, RN, CDP

Geriatric RN Consultant/Health Care Coordinator

Certified Dementia Practitioner

Alzheimer's Association Community Educator, Charlotte/SRA Counties

MEMORY CARE SOLUTIONS, INC.

SW Florida, Long Island & New England

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